

NATIONAL Assessment Centre Services: [ver 1 Jan 03] MNA 1200 4P627

Date In	30/5/20 11:24	Job description	Date & Time Completed	Done by
Ref No	NAL INC 2000 6042164	SAS e-filing		
Veh No	SLT 4583K	E-mail (within 3hrs, AIC 2hrs)		
IP Insurer	30/5/20 09:50	I-Motor Claim Form	MT/1093453 ⁰⁰¹	30/5/20 15:35
IP Insurer	Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
IP Insurer		I-Photo Uploaded		
IP Insurer		Assessment/Survey Report		
IP Insurer		Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / GW: (Tel:	Fax:
IP Particulars:	Veh No: GRC47B	INC () / Non-INC ()
Owner / Driver: (Tel:	
Policy No: ()	Period: ()	Cover Type: ()
Confirmed by: (Date:	Time:
Insured/Driver Liability: (%)	[Note-Est. Status (WO): N: 0-20%; P: 21-79% P: 80-100%]	
Year of Registration: ()	Warranty: YES () / NO ()	
Excess: (\$)	Loading: \$1,000 () / \$2,000 ()	

General Remarks:

() Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.

() Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In (); Invoice: YES () / NO (); Towing Co: ()

Remarks:	(INC 100line 6788 6016)	Date:	Done by:
1) Apply for Transport Allowance () / Courtesy Car ()			
2) QC Check / Post Repair Inspection ()			
3) Upload Resurvey Photo [Repair Cost > \$3000] ()			

Injury: _____

Date/Time	Actions

MA2003121	Invoice/Registration Credit	Amnt (\$)	Abnt (\$)
Client's Particulars:	1) AR: Accident Reporting (\$30);	30.00	
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$50)		
Contact No:	3) TP: Towing Fee \$40/\$45		
Damaged Portion:	4) PT: Follow-Through Survey \$120		
QC Checked by (Engr-In-Charge):	5) PT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (ver 10 Jan 2003)		
	6) TR: Re-Inspection \$75		
	7) NI: Idno DA + SMRT Survey \$160		
	8) NTUC Additional Services:		
	ON:		
	* N5: Courtesy Car / Tpt Allowance \$3		
	* N6: Repair Co-ordination \$10		
	* N7: Post Repair Inspection \$25		
	* N8: DV / Collmat Excess Coordination \$3		
	* N9: (N11): TP (5% INC) against INC \$20		
	* N12: Idno Mobile \$0		
	* N13: (N11): TP (5% INC) against INC \$20		
	* N14: (N11): TP (5% INC) against INC \$20		
	* N15: (N11): TP (5% INC) against INC \$20		
	* N16: (N11): TP (5% INC) against INC \$20		
	* N17: (N11): TP (5% INC) against INC \$20		
	* N18: (N11): TP (5% INC) against INC \$20		
	* N19: (N11): TP (5% INC) against INC \$20		
	* N20: (N11): TP (5% INC) against INC \$20		
	* N21: (N11): TP (5% INC) against INC \$20		
	* N22: (N11): TP (5% INC) against INC \$20		
	* N23: (N11): TP (5% INC) against INC \$20		
	* N24: (N11): TP (5% INC) against INC \$20		
	* N25: (N11): TP (5% INC) against INC \$20		
	* N26: (N11): TP (5% INC) against INC \$20		
	* N27: (N11): TP (5% INC) against INC \$20		
	* N28: (N11): TP (5% INC) against INC \$20		
	* N29: (N11): TP (5% INC) against INC \$20		
	* N30: (N11): TP (5% INC) against INC \$20		
	* N31: (N11): TP (5% INC) against INC \$20		
	* N32: (N11): TP (5% INC) against INC \$20		
	* N33: (N11): TP (5% INC) against INC \$20		
	* N34: (N11): TP (5% INC) against INC \$20		
	* N35: (N11): TP (5% INC) against INC \$20		
	* N36: (N11): TP (5% INC) against INC \$20		
	* N37: (N11): TP (5% INC) against INC \$20		
	* N38: (N11): TP (5% INC) against INC \$20		
	* N39: (N11): TP (5% INC) against INC \$20		
	* N40: (N11): TP (5% INC) against INC \$20		
	* N41: (N11): TP (5% INC) against INC \$20		
	* N42: (N11): TP (5% INC) against INC \$20		
	* N43: (N11): TP (5% INC) against INC \$20		
	* N44: (N11): TP (5% INC) against INC \$20		
	* N45: (N11): TP (5% INC) against INC \$20		
	* N46: (N11): TP (5% INC) against INC \$20		
	* N47: (N11): TP (5% INC) against INC \$20		
	* N48: (N11): TP (5% INC) against INC \$20		
	* N49: (N11): TP (5% INC) against INC \$20		
	* N50: (N11): TP (5% INC) against INC \$20		
	* N51: (N11): TP (5% INC) against INC \$20		
	* N52: (N11): TP (5% INC) against INC \$20		
	* N53: (N11): TP (5% INC) against INC \$20		
	* N54: (N11): TP (5% INC) against INC \$20		
	* N55: (N11): TP (5% INC) against INC \$20		
	* N56: (N11): TP (5% INC) against INC \$20		
	* N57: (N11): TP (5% INC) against INC \$20		
	* N58: (N11): TP (5% INC) against INC \$20		
	* N59: (N11): TP (5% INC) against INC \$20		
	* N60: (N11): TP (5% INC) against INC \$20		
	* N61: (N11): TP (5% INC) against INC \$20		
	* N62: (N11): TP (5% INC) against INC \$20		
	* N63: (N11): TP (5% INC) against INC \$20		
	* N64: (N11): TP (5% INC) against INC \$20		
	* N65: (N11): TP (5% INC) against INC \$20		
	* N66: (N11): TP (5% INC) against INC \$20		
	* N67: (N11): TP (5% INC) against INC \$20		
	* N68: (N11): TP (5% INC) against INC \$20		
	* N69: (N11): TP (5% INC) against INC \$20		
	* N70: (N11): TP (5% INC) against INC \$20		
	* N71: (N11): TP (5% INC) against INC \$20		
	* N72: (N11): TP (5% INC) against INC \$20		
	* N73: (N11): TP (5% INC) against INC \$20		
	* N74: (N11): TP (5% INC) against INC \$20		
	* N75: (N11): TP (5% INC) against INC \$20		
	* N76: (N11): TP (5% INC) against INC \$20		
	* N77: (N11): TP (5% INC) against INC \$20		
	* N78: (N11): TP (5% INC) against INC \$20		
	* N79: (N11): TP (5% INC) against INC \$20		
	* N80: (N11): TP (5% INC) against INC \$20		
	* N81: (N11): TP (5% INC) against INC \$20		
	* N82: (N11): TP (5% INC) against INC \$20		
	* N83: (N11): TP (5% INC) against INC \$20		
	* N84: (N11): TP (5% INC) against INC \$20		
	* N85: (N11): TP (5% INC) against INC \$20		
	* N86: (N11): TP (5% INC) against INC \$20		
	* N87: (N11): TP (5% INC) against INC \$20		
	* N88: (N11): TP (5% INC) against INC \$20		
	* N89: (N11): TP (5% INC) against INC \$20		
	* N90: (N11): TP (5% INC) against INC \$20		
	* N91: (N11): TP (5% INC) against INC \$20		
	* N92: (N11): TP (5% INC) against INC \$20		
	* N93: (N11): TP (5% INC) against INC \$20		
	* N94: (N11): TP (5% INC) against INC \$20		
	* N95: (N11): TP (5% INC) against INC \$20		
	* N96: (N11): TP (5% INC) against INC \$20		
	* N97: (N11): TP (5% INC) against INC \$20		
	* N98: (N11): TP (5% INC) against INC \$20		
	* N99: (N11): TP (5% INC) against INC \$20		
	* N100: (N11): TP (5% INC) against INC \$20		
	* N101: (N11): TP (5% INC) against INC \$20		
	* N102: (N11): TP (5% INC) against INC \$20		
	* N103: (N11): TP (5% INC) against INC \$20		
	* N104: (N11): TP (5% INC) against INC \$20		
	* N105: (N11): TP (5% INC) against INC \$20		
	* N106: (N11): TP (5% INC) against INC \$20		
	* N107: (N11): TP (5% INC) against INC \$20		
	* N108: (N11): TP (5% INC) against INC \$20		
	* N109: (N11): TP (5% INC) against INC \$20		
	* N110: (N11): TP (5% INC) against INC \$20		
	* N111: (N11): TP (5% INC) against INC \$20		
	* N112: (N11): TP (5% INC) against INC \$20		
	* N113: (N11): TP (5% INC) against INC \$20		
	* N114: (N11): TP (5% INC) against INC \$20		
	* N115: (N11): TP (5% INC) against INC \$20		
	* N116: (N11): TP (5% INC) against INC \$20		
	* N117: (N11): TP (5% INC) against INC \$20		
	* N118: (N11): TP (5% INC) against INC \$20		
	* N119: (N11): TP (5% INC) against INC \$20		
	* N120: (N11): TP (5% INC) against INC \$20		
	* N121: (N11): TP (5% INC) against INC \$20		
	* N122: (N11): TP (5% INC) against INC \$20		
	* N123: (N11): TP (5% INC) against INC \$20		
	* N124: (N11): TP (5% INC) against INC \$20		
	* N125: (N11): TP (5% INC) against INC \$20		
	* N126: (N11): TP (5% INC) against INC \$20		
	* N127: (N11): TP (5% INC) against INC \$20		
	* N128: (N11): TP (5% INC) against INC \$20		
	* N129: (N11): TP (5% INC) against INC \$20		
	* N130: (N11): TP (5% INC) against INC \$20		
	* N131: (N11): TP (5% INC) against INC \$20		
	* N132: (N11): TP (5% INC) against INC \$20		
	* N133: (N11): TP (5% INC) against INC \$20		
	* N134: (N11): TP (5% INC) against INC \$20		
	* N135: (N11): TP (5% INC) against INC \$20		
	* N136: (N11): TP (5% INC) against INC \$20		
	* N137: (N11): TP (5% INC) against INC \$20		
	* N138: (N11): TP (5% INC) against INC \$20		
	* N139: (N11): TP (5% INC) against INC \$20		
	* N140: (N11): TP (5% INC) against INC \$20		
	* N141: (N11): TP (5% INC) against INC \$20		
	* N142: (N11): TP (5% INC) against INC \$20		
	* N143: (N11): TP (5% INC) against INC \$20		
	* N144: (N11): TP (5% INC) against INC \$20		
	* N145: (N11): TP (5% INC) against INC \$20		
	* N146: (N11): TP (5% INC) against INC \$20		
	* N147: (N11): TP (5% INC) against INC \$20		
	* N148: (N11): TP (5% INC) against INC \$20		
	* N149: (N11): TP (5% INC) against INC \$20		
	* N150: (N11): TP (5% INC) against INC \$20		
	* N151: (N11): TP (5% INC) against INC \$20		
	* N152: (N11): TP (5% INC) against INC \$20		
	* N153: (N11): TP (5% INC) against INC \$20		
	* N154: (N11): TP (5% INC) against INC \$20		
	* N155: (N11): TP (5% INC) against INC \$20		
	* N156: (N11): TP (5% INC) against INC \$20		
	* N157: (N11): TP (5% INC) against INC \$20		
	* N158: (N11): TP (5% INC) against INC \$20		
	* N159: (N11): TP (5% INC) against INC \$20		
	* N160: (N11): TP (5% INC) against INC \$20		
	* N161: (N11): TP (5% INC) against INC \$20		
	* N162: (N11): TP (5% INC) against INC \$20		
	* N163: (N11): TP (5% INC) against INC \$20		
	* N164: (N11): TP (5% INC) against INC \$20		
	* N165: (N11): TP (5% INC) against INC \$20		
	* N166: (N11): TP (5% INC) against INC \$20		
	* N167: (N11): TP (5% INC) against INC \$20		
	* N168: (N11): TP (5% INC) against INC \$20		
	* N169: (N11): TP (5% INC) against INC \$20		
	* N170: (N11): TP (5% INC) against INC \$20		
	* N171: (N11): TP (5% INC) against INC \$20		
	* N172: (N11): TP (5% INC) against INC \$20		
	* N173: (N11): TP (5% INC) against INC \$20		
	* N174: (N11): TP (5% INC) against INC \$20		
	* N175: (N11): TP (5% INC) against INC \$20		
	* N176: (N11): TP (5% INC) against INC \$20		
	* N177: (N11): TP (5% INC) against INC \$20		
	* N178: (N11): TP (5% INC) against INC \$20		
	* N179: (N11): TP (5% INC) against INC \$20		
	* N180: (N11): TP (5% INC) against INC \$20		
	* N181: (N11): TP (5% INC) against INC \$20		
	* N182: (N11): TP (5% INC) against INC \$20		
	* N183: (N11): TP (5% INC) against INC \$20		
	* N184: (N11): TP (5% INC) against INC \$20		
	* N185: (N11): TP (5% INC) against INC \$20		
	* N186: (N11): TP (5% INC) against INC \$20		
	* N187: (N11): TP (5% INC) against INC \$20		
	* N188: (N11): TP (5% INC) against INC \$20		
	* N189: (N11): TP (5% INC) against INC \$20		
	* N190: (N11): TP (5% INC) against INC \$20		
	* N191: (N11): TP (5% INC) against INC \$20		
	* N192: (N11): TP (5% INC) against INC \$20		
	* N193: (N11): TP (5% INC) against INC \$20		
	* N194: (N11): TP (5% INC) against INC \$20		
	* N195: (N11): TP (5% INC) against INC \$20		
	* N196: (N11): TP (5% INC) against INC \$20		
	* N197: (N11): TP (5% INC) against INC \$20		
	* N198: (N11): TP (5% INC) against INC \$20		
	* N199: (N11): TP (5% INC) against INC \$20		
	* N200: (N11): TP (5% INC) against INC \$20		
	* N201: (N11): TP (5% INC) against INC \$20		
	* N202: (N11): TP (5% INC) against INC \$20		</

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	30/05/2020 11:24
Date Of Accident	30/05/2020 09:50
Exact Location Of Accident	BUKIT MERAH RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLT4583K
Insured/Policyholder	
Name Of Registered Owner	SHL MOTOR PTE. LTD.
Co Reg No	2XXXXX814M
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62826184

Vehicle Particulars

Manufacturer	HONDA
Model	-
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5109792828-01
Cover Note Number	

Driver

Name of Driver	MOHAMED ERDEE BIN MOHD MAHFOOD
NRIC No	SXXXX067D
Date Of Birth	14/12/1980
Occupation	OUTDOOR
Date Of Driving Pass	16/09/2008
Driving Experience	11 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90062014
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 513 JELAPANG ROAD #04-223
Postcode	670513
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO STATEMENT.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBC47B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
2. This Form must be **completed by the Policyholder and/or the Authorised Driver**.
3. Information provided must be as **truthful and accurate as possible**. Any wilful misrepresentation or withholding of material facts may allow insurance companies to **repudiate policy liability**.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "**Personal Information**") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "**Insurers**"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "**Purposes**")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

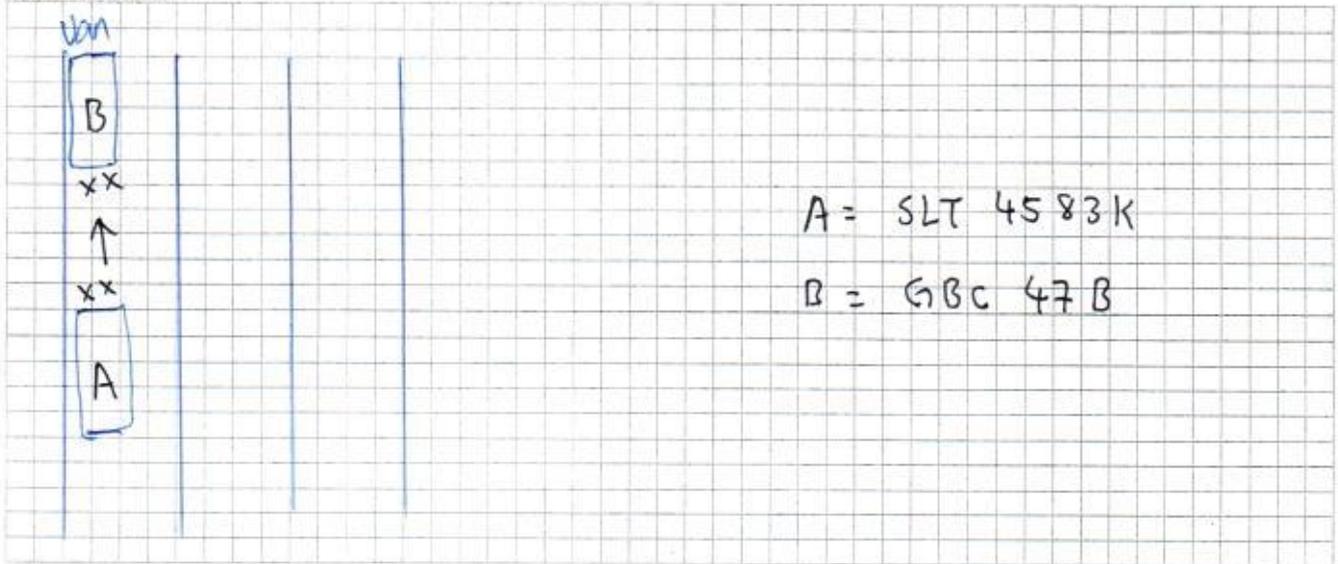


Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I Drive along Butik merah Road, a van ~~slat~~ stationary on the left side of the road. I can't stop on time hit the van

DECLARATION

I/We declare the foregoing particulars are true in every respect.



Policyholder's Signature
Date & Time:

[Signature]
Driver's Signature
(If driver is not the policyholder)
Date & Time:

[Signature]
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5109792828-01-000029 Cover : Third Party

- | | |
|---|-----------------------|
| 1. Index mark and Registration Number of Vehicle | : SLT4583K |
| Chassis Number | : JHMRN6B4085201217 |
| 2. Name of Policyholder | : SHL MOTOR PTE. LTD. |
| 3. Effective Date of Insurance | : 23 May 2020 |
| 4. Expiry Date of Insurance | : 22 May 2021 |
| 5. Persons or Classes of Persons entitled to drive# | |
| (a) The Policyholder. | |
| (b) Any other person who is driving on the Policyholder's order or with his/her permission. | |
| Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. | |
| 6. Limitations as to Use# | |
| (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business. | |

This Policy does not cover

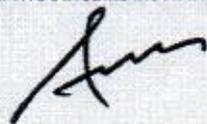
- | |
|---|
| (a) Use for racing, pace-making, reliability trial or speed-testing. |
| (b) Use for the carriage of goods (other than samples) in connection with any trade or business. |
| (c) Use for any purpose in connection with the Motor Trade. |
| # Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings. |

EXCESS (SECTION 1)	: N/A
EXCESS (SECTION 2)	: S\$1,500
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: N/A
NCD PROTECTION	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : ONE STOP INSURANCE AGENCY (00000571115)
Date of Issue : 18 May 2020 13:55 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive

ACCIDENT STATEMENT

ACCIDENT DATE: (30 / 5 / 2020) (DD/MM/YYYY), TIME: (09 : 52) (HH:MM)

LOCATION: Bukit merah Rd

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLT 4583K
b) INSURANCE COMPANY: NTUC INCOME
c) POLICY NUMBER: _____
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: Honda
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: Grab
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: MOHAMED ERLEE Bin mahfool (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S8038067D CONTACT: 90062014
c) ADDRESS: Blk 513 Jekpong Road

62826184

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Mohamed Erlee Bin mahfool (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S8038067D CONTACT: 90062014
c) ADDRESS: Blk 513 Jekpong Road

*d) DATE OF BIRTH: (14 / 12 / 1980) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: 12 years

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Hiver

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: GBC 47B MODEL: _____
b) DRIVER'S NAME: _____
c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
e) DRIVER'S NAME: _____
f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

* No of passenger
(including driver)
(1)

* No of passenger
(including driver)
()

* No of passenger
(including driver)
()

Email =

fax =

VIDEO = No.

Claim Handling

Accident MT/1093453

Policy No.	5109792828-01	Vehicle No.	SLT4583K	GST Registrati
Certificate No.	5109792828-01-000029			
Policyholder Name	SHL MOTOR PTE. LTD.			Policyholder N
Product Code	FLEET MASTER INSURANCE	Cover Type	Third Party	Loading
Contact No.(Mobile)	62826184	Contact No.(Office)		Contact No.(Hi
Email Address		Special Remark		eCode
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason
NCD Protection	No	NCD Entitlement(%)	0	Private Hire

▼ Accident Details

Report Date	30/05/2020 15:31	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	30/05/2020	Time of Accident hh:mm	09:50	Country of Acc
Reporting Centre		Orange Force		ICM No.
Accident Location	BUKIT MERAH RD			

▼ Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess		
OD Standard Excess		TP Standard Excess	1,500.00	
YIED OD Excess	0.00	YIED TP Excess	0.00	Driver is Cover
Additional Excess	0			
Total OD Excess Applicable	0.00	Total TP Excess Applicable	1,500.00	

▼ Benefits

▼ GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History	30/05/2020 15:33:22 System changed GST Status Verified from No to Yes		

▼ Policyholder Mailing Address

Address 1	51 UBI AVENUE 1	Address 2	#01-09 PAYA UBI INDUSTRIAL	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	01-09	Related Policy Number	5109793423-01	

▼ OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB
Unnamed driver Name	MOHAMED ERDEE BIN MOHD M	Driver NRIC	SXXXX067D	Driving Experi
Register Date of Driver License	16/09/2008	Driver Age	39	Contact No.(Hi
Contact No.(Mobile)	90062014	Contact No.(Office)		Address 3
Address 1	BLK 513 #04-223	Address 2	JELAPANG ROAD	Post Code
Address 4		Address Type	Singapore address	
Unit No.	04-223			Driver Insurer
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No
-------------------------------------	------	-------------	---

Modification History

Claim 001 New

Claim Type *	OD-MX	Insured Name	SH
Contact No.(Mobile)		Contact No. (Home)	
Email Address		DI Vehicle Number	SL
Claim Description	SLT4583K / GBC47B ON 30 May 2020		
Preferred Workshop		Insured Liability	Fully at Fault
Repair Option	Yes	Preferred Workshop, Name unknown	GIA report
Date Registered	30/05/2020 15:34	Received	
Report Taken By	SHAN HUI		

Print AK letter

Save Submit

Attachment

Accident No. MT/1093453 Claim No. 001
 Last Doc. Received Yes No Upload Date 30/05/2020 15:35

Path *

Category *

Confider

- No file chosen
-

<input type="button" value="Clear"/>	Please Select	NO
<input type="button" value="Clear"/>	Please Select	NO
<input type="button" value="Clear"/>	Please Select	NO
<input type="button" value="Clear"/>	Please Select	NO
<input type="button" value="Clear"/>	Please Select	NO
<input type="button" value="Clear"/>	Please Select	NO

Attachment List

Attachment	Uploaded By/Date	Category		Urgency	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 30 May 2020 15:35	SAS		Normal	S
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 30 May 2020 15:35	NRIC/ Driving License	Y	Normal	NRIC/ Dri
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 30 May 2020 15:35	Photos		Normal	Ph
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 30 May 2020 15:35	Photos		Normal	Ph
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 30 May 2020 15:34	Photos		Normal	Ph
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 30 May 2020 15:34	Photos		Normal	Ph
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 30 May 2020 15:34	Photos		Normal	Ph
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 30 May 2020 15:34	Photos		Normal	Ph
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 30 May 2020 15:34	Photos		Normal	Ph

Video List

Uploaded By/Date	Folder Date	File Name	
<input type="button" value="Display in New Window"/> <input type="button" value="Scan and uploading"/>			